



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 7335

<b>SERIAL NUMBER</b> 10/739,227	<b>FILING OR 371(c) DATE</b> 10/27/2003 <b>RULE</b>	<b>CLASS</b> 356	<b>GROUP ART UNIT</b> 2886	<b>ATTORNEY DOCKET NO.</b> MSE #2673
------------------------------------	---	---------------------	-------------------------------	---

**APPLICANTS**

Andrew J. Dosmann, Granger, IN;  
 Mohammad A. Kheiri, Elkhart, IN;

**\*\* CONTINUING DATA \*\*\*\*\*** *I.A.*

This appln claims benefit of 60/421,626 10/29/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *I.A.*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

01/30/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> IN	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 33	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<i>I.A.</i> Initials			

**ADDRESS**

Jerome L. Jeffers, Esq.  
 Bayer Healthcare LLC  
 P.O. Box 40  
 Elkhart, IN46515-0040

**TITLE**

Diffuse reflectance readhead

<b>FILING FEE RECEIVED</b> 1090	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit